

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Bowman Oil Company, a General Partnership
Well Name	KELLER C NE 2
Doc ID	1348579

All Electric Logs Run

Computer Processed Interpretation
Microresistivity Log
Dual Comp Porosity Log
Dual Induction Log

Form	ACO1 - Well Completion
Operator	Bowman Oil Company, a General Partnership
Well Name	KELLER C NE 2
Doc ID	1348579

Tops

Name	Top	Datum
Anhydrite	1544	+657
Hebner	3412	-1211
Toronto	3435	-1234
Lansing-Kansas City	3451	-1250
Base of Kansas City	3659	-1458
Conglomerate	3719	-1518
Arbuckle	3768	-1567
RTD	3841	-1640

Jameson Consulting
API 15-163-24313

GEOLOGIST'S REPORT
DRILLING TIME AND SAMPLE LOG

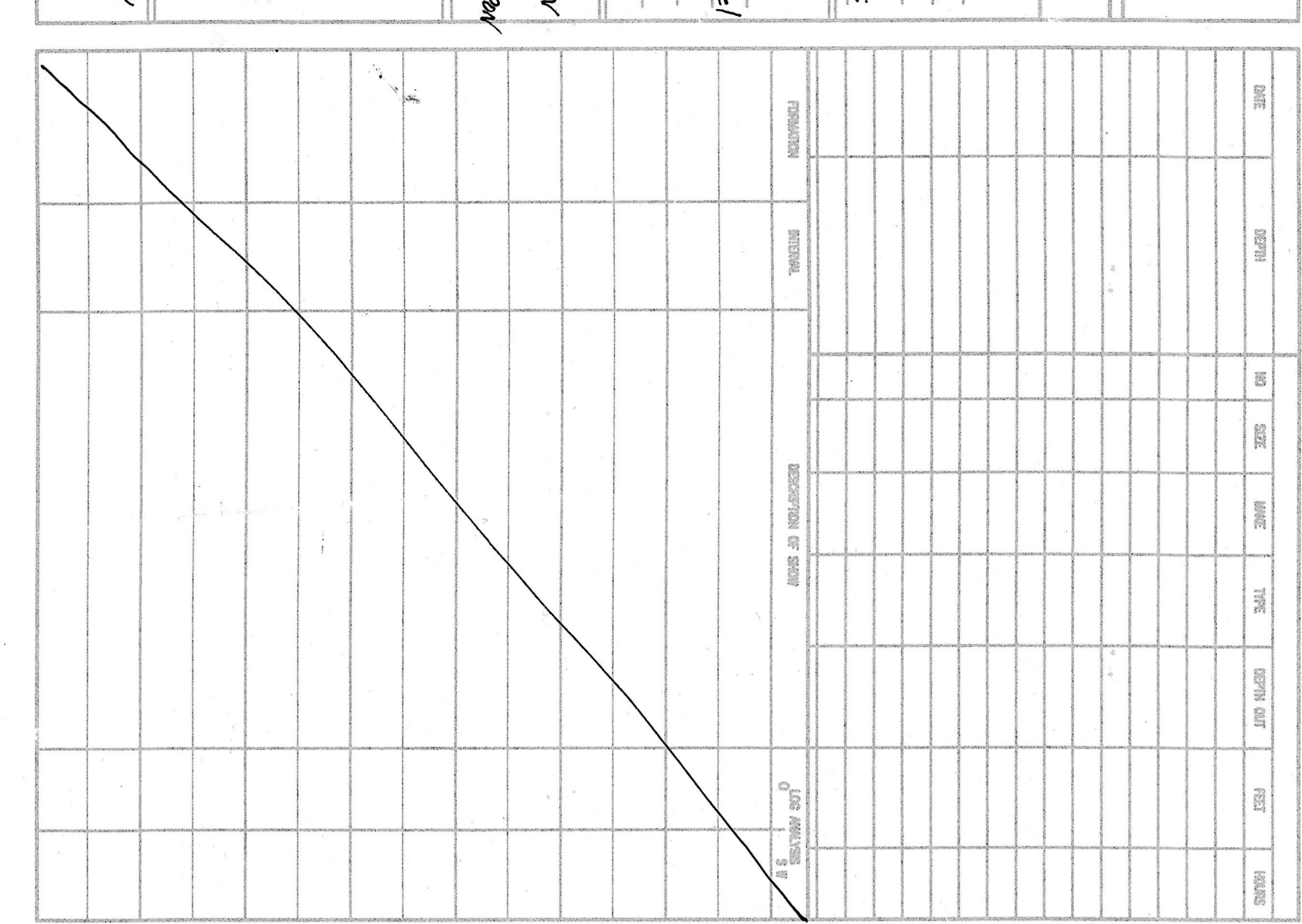
OPERATOR Bowman Oil Company
 LEASE KELLER C NEWELL NO #22
 FIELD MARCOITE
 LOCATION NE SW SE NE
 SEC. 30 TWP. 10S RGE. 19W
 COUNTY ROOKS STATE KANSAS
 CONTRACTOR WHITE KNIGHT DRLLG.
 COMM. 07-11-2016 COMP. 07-16-2016
 RTD. 3841 LOG TO 3841 TD
 SAMPLES SHOWN FROM 3200 TO 3841
 DRILLING TIME KEPT FROM 3200 TO 3841
 SAMPLES EXAMINED FROM 3200 TO 3841
 GEOLOGICAL SUPERVISION FROM 3200 TO 3841
 MUD UP 3008 TYPE MUD FRESH/CHEMICAL

ELEVATION 2201
 KB 2201
 DF 2196
 Measurements Are All From KELLY BUILDING
 CASING RECORD
 SURFACE 8 5/8 @ 220
 150 SWS 3/8 CC 2894
 PRODUCTION

NEUTRON DENSITY SURVEYS
 ELECTRICAL SURVEYS
 DUAL INDUCTION
 MICRO DENSITY-NEUTRON

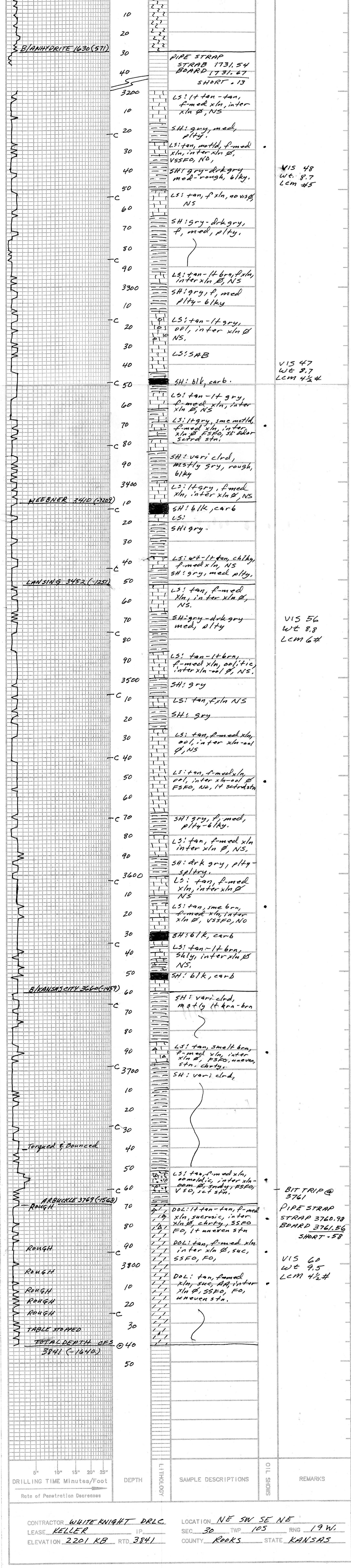
FORMATION TYPE LOG SAMPLE STRUCT. COMP. DATA
 ANHYDRITE 1570 (610) 1590 (611) 0
 BIANHYDRITE 1630 (571) 1630 (571) 0
 TPEKA 3192 (-995) 3410 (-1209) +3
 HEEBNER 3410 (-1210) 3492 (-1251) +1
 LANSHING 3451 (-1250) 3440 (-1469) +2
 KANSASCITY 3660 (-1459) 3700 (-1568) +3
 ARBUCKLE 3769 (-1568) 3841 (-1640) +3

REFERENCE WELL FOR STRUCTURAL COMPARISON
 KELLER I-3D NW 55 NE SEC 30-10S-19W
 ROOKS COUNTY KANSAS
 HATCHINSON OIL COMPANY
 SEC 30-10S-19W



DATE	DEPTH	NO.	TEST	TYPE	OPEN	FEET	REMARKS

NO.	INCHES	FEET	FEET	FEET	FEET	REMARKS



CONTRACTOR WHITE KNIGHT DRLLG. LOCATION NE SW SE NE
 LEASE KELLER IP 30 TWP. 10S RNG 19W
 ELEVATION 2201 KB 3841 COUNTY ROOKS STATE KANSAS

Summary of Changes

Lease Name and Number: KELLER C NE 2

API/Permit #: 15-163-24313-00-00

Doc ID: 1348579

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved Date	09/14/2016	03/17/2017
Save Link	../..kcc/detail/operatorEditDetail.cfm?docID=1313954	../..kcc/detail/operatorEditDetail.cfm?docID=1348579

Summary of Attachments

Lease Name and Number: KELLER C NE 2

API: 15-163-24313-00-00

Doc ID: 1348579

Correction Number: 1

Attachment Name